

<b>TRANSMITTAL SLIP</b>		DATE 1/15/80
TO: Plans & Control - Carl B.		
ROOM NO. 1006	BUILDING Ames Bldg.	
REMARKS:		
<p>Per our telecon. These are the routing sheets I use when returning incomplete or incorrect PAR's, EOP's, &amp; AWP's back to component personnel.</p> <p>Next time I return a batch I will start keeping tabs on the types of things I am returning them for.</p>		
FROM: OC/TRB - Sue		
ROOM NO. 5E-13	BUILDING Hqs.	EXTENSION <input type="text"/>

FORM NO. 241  
1 FEB 55

REPLACES FORM 36-8  
WHICH MAY BE USED.

(47)

## ROUTING AND RECORD SHEET

SUBJECT: (Optional)				
Correction of Performance Appraisal Report				
FROM:		EXTENSION	NO.	
OP/CD/OC-TRB			STAT	
Attn: Sue			DATE	
5E-13 Hqs. Bldg.				
TO: (Officer designation, room number, and building)	DATE		OFFICER'S INITIALS	COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)
	RECEIVED	FORWARDED		
1.				Please correct or complete the following item(s) and return to the Performance Appraisal Report Control Monitor at 5E-13 Hqs. Bldg. ASAP. Thank you.
2.				
3.				<u>SECTION A - GENERAL INFORMATION</u>
4.				<input type="checkbox"/> #1. SSN
				<input type="checkbox"/> #2. Name
				<input type="checkbox"/> #11. Reporting Period
				<input type="checkbox"/> #13. Type of Report
5.				<u>SECTION C - SPECIFIC DUTIES</u>
6.				<input type="checkbox"/> Complete Specific Duties
				<input type="checkbox"/> All Specific Duties must be rated - cannot accept "NA", "5/6", + 's, or - 's.
7.				<u>SECTION D - COMMENTS AND CERTIFICATION</u>
8.				<u>#1. Supervisor's Comments</u>
				<input type="checkbox"/> Complete Comments
9. OP/CD/OC-TRB				<input type="checkbox"/> Trial Period Employee - 1st sentence must be "Recommendation for continued employment . . ."
Attn: Sue				
5E-13 Hqs. Bldg.				<u>#2. Overall Performance Rating</u>
10.				<input type="checkbox"/> Provide Overall Rating - cannot accept "NA", "3/4", + 's, or - 's.
11.				
CONTINUATION				
12.				<u>#3. Supervisor Certification</u>
#4. Employee Comments				<input type="checkbox"/> Months Employee in Position
<input type="checkbox"/> Date, Signature of EMPLOYEE				<input type="checkbox"/> Months Employee under Supervisor
13.				<input type="checkbox"/> Explain why Employee has not seen report
#5. Reviewing Official Comments				<input type="checkbox"/> Interim Discussion(s) . . .
<input type="checkbox"/> Complete Comments				<input type="checkbox"/> Date, Title, Signature of SUPERVISOR
14. <input type="checkbox"/> Date, Title, Signature of REVIEWING OFFICIAL				
<input type="checkbox"/> Date, Signature of EMPLOYEE				
15.				<u>Page 3 - GENERAL INFORMATION</u>
				<input type="checkbox"/> #1. SSN, <input type="checkbox"/> #2. Name
				<input type="checkbox"/> #11. Reporting Period

## ROUTING AND RECORD SHEET

SUBJECT: (Optional)

Correction of Evaluation of Potential

FROM:

OP/CD/OC-TRB  
Attn: Sue  
5E-13 Hqs. Bldg.

NO.

STAT

DATE

TO: (Officer designation, room number, and building)

DATE

OFFICER'S  
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

RECEIVED

FORWARDED

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

11.

12.

OP/CD/OC-TRB  
Attn: Sue  
5E-13 Hqs. Bldg.

13.

14.

15.

Please correct or complete the following item(s) and return to the Performance Appraisal Report Control Monitor at 5E-13 Hqs. Bldg. ASAP. Thank you.

SECTION A - GENERAL INFORMATION

- ☐ #1. SSN  
☐ #2. Name  
☐ #3. Reporting Period

SECTION B - EVALUATION

- ☐ Must check one of the first two choices. If the 2nd of the two is checked, one of the four choices below that one must also be checked.

SECTION C - SUPERVISOR'S COMMENTS

- ☐ Complete Comments - this must be done even if the first choice was checked at the top.

SECTION D - CERTIFICATION

- ☐ Signature, Date of SUPERVISOR  
☐ Signature, Date of EMPLOYEE

## ROUTING AND RECORD SHEET

SUBJECT: (Optional)

Correction of Advance Work Plan

FROM:

OP/CD/OC-TRB

Attn: Sue

5E-13 Hqs. Bldg.

NO.

STAT

DATE

TO: (Officer designation, room number, and building)

DATE

RECEIVED

FORWARDED

OFFICER'S  
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1.

Please correct or complete the following item(s) and return to the Performance Appraisal Report Control Monitor at 5E-13 Hqs. Bldg. ASAP. Thank you.

2.

3.

GENERAL INFORMATION

4.

[ ] #1. SSN  
[ ] #2. Name

5.

A. EMPLOYEE'S JOB

[ ] Complete required info.

6.

B. WORK OBJECTIVES, GOALS AND PRIORITIES

7.

[ ] Complete required info.  
[ ] Complete "Period Covered"

8.

[ ] The AWP is attached to the PAR covering the SAME PERIOD.

9.

[ ] Signature, Title, Date of EMPLOYEE

10.

[ ] Signature, Title, Date of SUPERVISOR

11. OP/CD/OC-TRB

Attn: Sue

5E-13 Hqs. Bldg.

12.

13.

14.

15.

CORRECTION OF PERFORMANCE APPRAISAL REPORT

SECTION A - GENERAL INFORMATION

#1. SSN III  
 #2. Name \_\_\_\_\_  
 #11. Reporting Period III  
 #13. Type of Report III

SECTION C - SPECIFIC DUTIES

- Complete Specific Duties \_\_\_\_\_  
 - All Specific Duties must be rated -  
 cannot accept "NA", "5/6", +'s, or -'s. III

SECTION D - COMMENTS AND CERTIFICATION

#1. Supervisor's Comments  
 - Complete Comments \_\_\_\_\_  
 - Trial Period Employee - 1st sentence  
 must be "Recommendation for  
 continued employment . . ." III  
 #2. Overall Performance Rating  
 - Provide Overall Rating - cannot  
 accept "NA", "3/4", +'s, or -'s. \_\_\_\_\_  
 #3. Supervisor Certification  
 - Months Employee in Position III  
 - Months Employee under Supervisor III  
 - Explain why Employee has not seen  
 report II  
 - Interim Discussion(s) . . . III  
 - Date, Title, Signature of SUPERVISOR  
 or PERS OFF in case of a "Y" report III

PAGE 3 - GENERAL INFORMATION

#1. SSN III  
 #2. Name III  
 #11. Reporting Period III  
 #4. Employee Comments  
 - Date, Signature of EMPLOYEE III  
 #5. Reviewing Official Comments  
 - Complete Comments I  
 - Date, Title, Signature of REVIEWING  
 OFFICIAL or PERS OFF in case of "No Appr. R/O" III  
 - Date, Signature of EMPLOYEE III

Sent back 5 reports done on  
 the worksheet.

SECTION A - GENERAL INFORMATION

#1. SSN 111 111 111 111 11  
 #2. Name 111 111  
 #3. Reporting Period 111 111 111 111 111

SECTION B - EVALUATION

- Must check one of the first two choices.  
 If the 2nd of the two is checked, one of  
 the four choices below that one must  
 also be checked. 111 111 111 111 111 111 111 111 111 111 111 111 111  
111

SECTION C - SUPERVISOR'S COMMENTS

- Complete Comments - this must be done  
 even if the first choice was checked at  
 the top. 111 111

SECTION D - CERTIFICATION

- Signature, Date of SUPERVISOR or PERS OFF 111 11  
 - Signature, Date of EMPLOYEE or Explanation  
 as to why emp. hasn't signed 111 111 111 111 111 1

DO AN EVALUATION OF POTENTIAL 111 111 111 111 111 1

attach w/ PAR at submission: 1

CORRECTION OF ADVANCE WORK PLAN

GENERAL INFORMATION

- #1. SSN III
- #2. Name \_\_\_\_\_

A. EMPLOYEE'S JOB

- Complete required info. \_\_\_\_\_

B. WORK OBJECTIVES, GOALS, AND PRIORITIES

- Complete required info. \_\_\_\_\_
- Complete "Period Covered" III III III
- The AWP is attached to the PAR covering  
the SAME PERIOD III III III III
- Signature, Title, Date of EMPLOYEE III
- Signature, Title, Date of SUPERVISOR III

3  
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As part of the evaluation of the new PA system, a manual check was made of approximately 10% of all incoming PARs received in ~~TRE~~ during the course of the first year. A total of 1317 were reviewed to ascertain primarily the use of the employee comments section, and EOP. The second category was selected largely because concern had been expressed at the time of the development of the system that supervisors would use as a cop out the option which states "The assignment during the rating period did not offer the opportunity to evaluate readiness to assume higher level responsibility. Employee is rendering a valuable contribution" as opposed to the option "Employee appears to lack the capability to assume higher level responsibility". 6.3% of supervisors ~~xxx~~ selected the cop out option, and altho ~~so~~ count was made of those who selected the "appears to lack potential", ~~it~~ <sup>option</sup> our impression is that it was at the same low percentage or perhaps even lower. In contrast, ~~xxxxxx~~ 36.1% of

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In defense of supervisors who used this option it should be pointed out that many were new to the job themselves, or the employee was, and it could <sup>then</sup> logically ~~then~~ be inferred that there had been insufficient time for a fair evaluation to be made. On the other hand in some instances supervisors/employees had been on the job for periods ranging upwards of 33-45 months and in several extreme examples more than 100 months. It is difficult to understand why, given such lengths of time, a supervisor still feels unable to make such a basic determination.

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In contrast, 36.7% of supervisors rated their employees at the highest end of the potential scale....."Employee is ready to assume higher level responsibility". Those rated at the highest end number approximately 7 times those who were, in effect, not rated. It is apparent from these statistics that fears of <sup>"Cop and"</sup> ~~the~~ overuse were unwarranted, and that we appear to have the same problem with EOP which exists with PAR ~~ratings~~ ratings.....they are heavily weighted toward the high end of the scale.

In the fall of 1979, auditorium briefings introduced the new PA system to HQS. supervisors. It was apparent from some questions and comments during these sessions that there was supervisory concern that giving employees the option of commenting would serve, among other things, to encourage criticism <sup>of</sup> and confrontation with, the supervisor. Our figures show the following. Of the sample of 1317, only 4% (61 employees) utilized the employee comments section. Of that figure, 18 could be categorized as basically concurring with the supervisors' comments, 20 were in the nature of self appraisal (statements regarding the current job, plans for future assignments, training and the like) and only 23 could be read as confrontational. This <sup>latter</sup> group comprises 38% of those who made any comment, and they are only 1.7% of the total sample. It is clear that only a small percentage of employees utilized this section, and at no time did it become, except for a very small group, a vehicle for confrontation between employee and supervisor.

Altho not specifically tallied it was obvious (it perhaps more than 50% <sup>of the entire sample</sup> of the ~~sample~~) that supervisors found it impossible to keep within the bounds of the space provided for narration, and added additional sheets, in some cases as many as 3 or 4 more pages.

STAT

<u>Level</u>	<u>AV. RATING</u>
SIS-5	6.75
SIS-4	6.23
SIS-3	6.23
SIS-12	6.05
GS-15	5.86
GS-14	5.65
GS-13	5.52
GS-12	5.38
GS-11	5.35
GS-10	5.36
GS-9	5.30
GS-8	5.20
GS-7	5.37
GS-6	5.23
GS-5	4.82
GS-4	4.46
GS-3	4.09
	<u>5.391</u>

PAR

CAREER Service RANK by Grade Low L

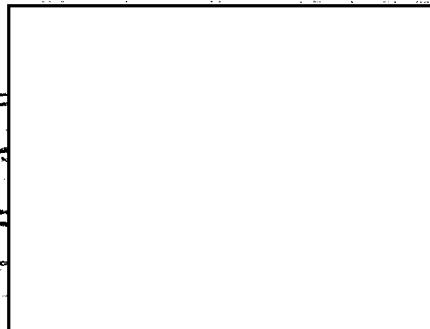
3	4	5	6	7	8	9	10	11	12	13	14	15	SIS
I	R	E	E	E	E	E	E	R	R	R	R	E	E
M	E	R	R	D	D	D	M	E	M	M	E	M	R
E	M	M	D	R	R	M	D	M	E	E	M	R	M
R	D	D	M	M	M	R	R	D	D	D	D	D	D
D	I	I	I	I	I	I	I	I	I	I	I	I	I

PAR RANK by SubCategory

1	2	3	4	5	6	7
C	C	T (2)	W (26)	W (44)	P (49)	P (7)
P	W	C (2)	C (19)	F (40)	C (36)	C (7)
{ T	P	W (2)	T (19)	C (35)	T (35)	T (13)
{ W	T	P (11)	P (10)	P (33)	W (26)	W (2)

STAT Category

Professional  
Clerical  
Technical  
Ungraded



PAR RANK by Race

1	2	3	4	5	6	7
1 = 14152 (W) 89%	H (11)	B (4)	B (30)	A (42)	A (48)	A (8)
1 = 1370 (B) 8%	B (11)	A (3)	H (13)	B (41)	W (45)	W (7)
1 = 205 (H) 1%	W 0	W (1)	W (12)	W (34)	H (38)	H (5)
1 = 186 (A) 1%	A 0	H (1)	A (11)	A (31)	B (23)	B (1)

STAT

# RAR RANK by Sex

3	4	5	6	7	
F(2)	F(17)	M(34)	M(45)	F(7)	TOTAL
M(1)	M(13)	F(34)	F(40)	M(6)	

F(1)	F(14)	M(34)	M(47)	F(8)	White only
M(1)	M(12)	F(33)	F(43)	M(6)	

F(5)	F(31)	M(43)	F(23)	M(2)	BLACK ONLY
M(4)	M(28)	F(39)	M(22)	F(1)	

F(8)	F(21)	M(34)	M(49)	F(8)	ASIAN ONLY
M(1)	M(8)	F(21)	F(44)	M(7)	

F(3)	M(4)	F(46)	M(41)	F(7)	HISPANIC ONLY
M(0)	F(11)	M(40)	F(31)	M(4)	

3	4	5	6	7
B(4)	B(28)	B(43)	W(47)	W(4)
W(1)	W(12)	W(34)	B(22)	B(2)

B(5)	B(31)	B(39)	W(40)	W(7)
W(2)	W(17)	W(34)	B(23)	B(1)

STAT

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